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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	James First name E. Middle name Malley, III Last name and Suffix (Sr., Jr., II, III)	Roxanne First name Lea Middle name Malley Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5434	xxx-xx-4939

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Debtor 1 James E. Malley, III
Debtor 2 Roxanne Lea Malley

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	□ I have not used any business name or EINs. DBA Mackenzie Grapics, Inc. FDBA Jackson Builders FDBA Jackson Builders, Inc. Business name(s)	■ I have not used any business name or EINs. Business name(s) EINs		
5. Where you live	641 Young Ave.	If Debtor 2 lives at a different address:		
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6. Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		
6. Why you are choosing this district to file for	Number, Street, City, State & ZIP Code Kane County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours in here. Note that the court will send any notices to thi mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, have lived in this district longer than in any other district. I have another reason.		

	ctor 1 James E. Malley, I Roxanne Lea Mall	II	Doc 1	Filed 09/20/18 Document	Entered 09/2 Page 3 of 71	20/18 15:10:47 Case number (if known)	Desc Main
Par	t 2: Tell the Court About	our Ban	kruptcy Case	9			
7.	The chapter of the Bankruptcy Code you are			ef description of each, se to the top of page 1 and			Individuals Filing for Bankruptcy
	choosing to file under	■ Cha	pter 7				
		☐ Cha	pter 11				
		☐ Cha	pter 12				
		☐ Cha	pter 13				
3.	How you will pay the fee	ation and all or	rder. If your at pre-printed ac need to pay the Filing Fee request that it is not require to your	may pay. Typically, if you torney is submitting your ddress. he fee in installments. in Installments (Official Firmy fee be waived (You red to, waive your fee, ar	u are paying the fee y payment on your bel ff you choose this opt form 103A). may request this option and may do so only if yunable to pay the fee	vourself, you may pay with alf, your attorney may pay in the control of the control of the court income is less than in installments). If you control of the court income is less than in installments). If you control of the court income is less than in installments).	in your local court for more details th cash, cashier's check, or money pay with a credit card or check with Application for Individuals to Pay or Chapter 7. By law, a judge may, 150% of the official poverty line that hoose this option, you must fill out a it with your petition.
€.	Have you filed for bankruptcy within the last 8 years?	■ No.					
			District		When	Case nu	ımber
			District _		When	Case nu	ımber
			District		When	Case nu	ımber
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					

11. Do you rent your residence?

■ No.

Go to line 12.

Debtor

District

Debtor

District

☐ Yes.

Has your landlord obtained an eviction judgment against you?

When

When

☐ No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Relationship to you

Relationship to you

Case number, if known

Case number, if known

Case 18-26532 Doc 1 Filed 09/20/18 Entered 09/20/18 15:10:47 Desc Main Debtor 1 James E. Malley, III

Deb	otor 2 Roxanne Lea Mall	ley		Case number (if known)		
Par	Report About Any Bu	Isinesses	You Own as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to Part 4.			
		■ Yes.	Name and location of bus	siness		
	A sole proprietorship is a business you operate as		Mackenzie Graphics	Inc.		
	an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one		641 Young Ave. Batavia, IL 60510			
	sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code		
	it to this petition.		Check the appropriate bo	ox to describe your business:		
			Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as o	lefined in 11 U.S.C. § 101(53A))		
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
			None of the abov	е		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, for in 11 U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am not filing under Cha	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	· Have Anv	/ Hazardous Property or An	y Property That Needs Immediate Attention		
	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to	□ 1es.	What is the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
	·			Number, Street, City, State & Zip Code		

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Debtor 1 James E. Malley, III

Debtor 2 Roxanne Lea Malley Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-26532 Doc 1 Filed 09/20/18 Entered 09/20/18 15:10:47 Desc Main Document Page 6 of 71

James E. Malley, III Debtor 1 Debtor 2 **Roxanne Lea Malley** Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0.001-25.000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million **\$100.001 - \$500.000** □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ James E. Malley, III /s/ Roxanne Lea Malley James E. Malley, III **Roxanne Lea Malley** Signature of Debtor 1 Signature of Debtor 2 Executed on September 20, 2018 Executed on September 20, 2018 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 James E. Malley, III
Debtor 2 Roxanne Lea Malley

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ William	i l'eitelbaum	Date	September 20, 2018	
Signature of	Attorney for Debtor		MM / DD / YYYY	
William Te	eitelbaum 6274270			
William Te	eitelbaum			
c/o Donald	d Leibsker alle Street, Suite 1230			
Chicago, I	L 60603			
	City, State & ZIP Code			
Contact phone	630-202-8405	Email address	lawbrt@aol.com	
6274270 IL	_			
Bar number & S	tate			

		17/7/11/11			
Fill in this infor	mation to identify your	case:			
Debtor 1	James E. Malley,	III			
	First Name	Middle Name	Last Name		
Debtor 2	Roxanne Lea Mal	lley			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is amended filing	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	265,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	27,459.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	292,459.00
Pa	rt 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	254,909.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	171,738.00
	Your total liabilities	\$	426,647.00
Pa	Your total liabilities rt 3: Summarize Your Income and Expenses	\$	426,647.00
Pa 4.		\$	
	rt 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I)		8,497.00
4. 5.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,497.00
4. 5.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ \$	8,497.00 8,323.00
4. 5.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ \$	8,497.00 8,323.00
4. 5. Pa	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ \$ur other scl	8,497.00 8,323.00 nedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

	Ousc 10 20302	DUCI	1 1100 03/20/10	Littered 03/20/10 13:10:47	DC30
			Document	Page 9 of 71	
Debtor 1	James E. Malley, III			3	
	Roxanne Lea Malley			Case number (if known)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Ca	ase 18-26532	P. Doc 1	Filed 09/20 Documen		.8 15:10:47	Desc	: Main
ΞIII	in this inforr	mation to identify	your case and th					
Deb	otor 1	James E. Ma						
Deb	otor 2	First Name Roxanne Lea	Middle Mallev	Name	Last Name			
(Spoi	use, if filing)	First Name	Middle	Name	Last Name			
Jnit	ed States Ba	ankruptcy Court for t	the: NORTHER	N DISTRICT OF	ILLINOIS			
Cas	e number _							Check if this is an amended filing
SC n eachink	chedul ch category, s it fits best. B	le as complete and a e space is needed, a	operty escribe items. List a	e. If two married p	e. If an asset fits in more than one people are filing together, both are On the top of any additional pages	equally responsible	for supp	lying correct
Part					ou Own or Have an Interest In			
		, , , ,	ntable interest in a	ny residence, bai	numg, lana, or similar property.			
_	No. Go to Par	t 2. s the property?						
1.1	644 Voun	a Ava		What is the pro	operty? Check all that apply			
	Street address,	y Ave. if available, or other desc	ription	Duplex of	amily home or multi-unit building ninium or cooperative	the amount of any	secured c	s or exemptions. Put laims on Schedule D: Secured by Property.
	Batavia	IL	60510-0000	Land	ctured or mobile home	Current value of the entire property?		Current value of the portion you own?
	City	State	ZIP Code	☐ Investme	ent property are	\$265,000		\$265,000.00
				☐ Other		(such as fee simp	le, tenano	r ownership interest by by the entireties, or
				Who has an in	terest in the property? Check one 1 only	a life estate), if kn	OWII.	
	Kane			☐ Debtor 2	•	-		
	County				1 and Debtor 2 only			unity property
				Other informat	one of the debtors and another tion you wish to add about this ite ification number:	(see instructions)	
					ries from Part 1, including any			\$265,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

page 1 Official Form 106A/B Schedule A/B: Property

Part 2: Describe Your Vehicles

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3. C a		Roxanne Lea Malley	Ca	ase number (if known)	
	ırs, vans,	, trucks, tractors, sport ut	ility vehicles, motorcycles		
	No				
_	Yes				
3.1	Make:	Honda	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model:	Odyssey	☐ Debtor 1 only		aims Secured by Property.
	Year:	2012	Debtor 2 only	Current value of the	Current value of the
			Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	At least one of the debtors and another		
			Check if this is community property (see instructions)	\$10,900.00	\$10,900.00
2.2	Make:	Buick	Who has an interest in the manualt? Obstant	Do not deduct secured	claims or exemptions. Put
3.2	Model:	Enclave	Who has an interest in the property? Check one Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year:	2011	Debtor 2 only		
	Approxir		000 Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other inf	formation:	☐ At least one of the debtors and another		
			Check if this is community property (see instructions)	\$7,700.00	\$7,700.00
	res				
			you own for all of your entries from Part 2, including ar		\$18.600.00
	dd the do		you own for all of your entries from Part 2, including ar Write that number here		\$18,600.00
.pa	dd the do ages you		Write that number here		\$18,600.00
.pa	dd the do	have attached for Part 2.	Write that number here		\$18,600.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
Part : Do y 6. Ho	dd the dd ages you 3: Descri ou own d ousehold xamples:	thave attached for Part 2. the Your Personal and House or have any legal or equit	Write that number hereehold Items		Current value of the portion you own? Do not deduct secured
Part : Do y 6. Ho	dd the dd ages you 3: Descri ou own d ousehold xamples:	ibe Your Personal and House or have any legal or equit goods and furnishings Major appliances, furniture	write that number hereehold Items able interest in any of the following items? , linens, china, kitchenware		Current value of the portion you own? Do not deduct secured
Part : Do y 6. Ho	dd the dd ages you 3: Descri ou own d ousehold xamples:	ibe Your Personal and House or have any legal or equit goods and furnishings Major appliances, furniture escribe	Write that number hereehold Items able interest in any of the following items?	cabinets,	Current value of the portion you own? Do not deduct secured claims or exemptions.
Part: Do y 6. Ho	dd the dd ages you 3: Descri ou own d busehold xamples: No Yes. De	ibe Your Personal and House or have any legal or equit goods and furnishings Major appliances, furniture escribe household tables, furniture	ehold Items able interest in any of the following items? , linens, china, kitchenware d goods and furnishing- 3 couches, 15 chairs, 2 lamps, love seat, desk, 4 beds, 5 dressers and	cabinets,	Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 3 Do y 6. Ho E.	dd the ddages you Be Descritou own down of the comples: No Yes. Descritou own of the comples: No No No	ibe Your Personal and House or have any legal or equitage of have any legal or equitage or equitage of have any legal or equitage or	write that number hereehold Items able interest in any of the following items? , linens, china, kitchenware d goods and furnishing- 3 couches, 15 chairs, 2	cabinets,	Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 3 Do y 6. Ho E.	dd the ddages you Be Descritou own down of the comples: No Yes. Descritou own of the comples: No No No	ibe Your Personal and House or have any legal or equit goods and furnishings Major appliances, furniture escribe househole 8 tables, 7 tables Televisions and radios; aud	ehold Items able interest in any of the following items? In linens, china, kitchenware d goods and furnishing- 3 couches, 15 chairs, 2 linens, love seat, desk, 4 beds, 5 dressers and dio, video, stereo, and digital equipment; computers, printerest.	cabinets,	Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B

Entered 09/20/18 15:10:47 Case 18-26532 Doc 1 Filed 09/20/18 Desc Main Document Page 12 of 71 James E. Malley, III Debtor 1 Debtor 2 **Roxanne Lea Malley** Case number (if known) 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe..... \$500.00 necessary wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$300.00 wedding ring 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

Official Form 106A/B Schedule A/B: Property page 3

Institution name:

□ No

■ Yes.....

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Debtor 2	Roxanne Lea Malle			Case number ((if known)	
	17.1.	checking 1676	Harris Bank			\$2,048.00
	17.2.	checking 6565	Harris Bank; joint with Ma	cKenzie Malle	e y	\$674.00
	17.3.	checking 0571	Harris Bank; joint with Jac year old son) debtor does not contribut account			\$1,287.00
Exam ■ No □ Yes. 19. Non-p		ent accounts with broke Institution or issuer nar	rage firms, money market accounts ne: ted and unincorporated business		n interest in an	LLC, partnership, and
	Give specific information	about them		% of ownersh	iip:	
	Ma	ackenzie Graphics, I	nc.	100%	%	Unknown
		ckson Builders; par son Malley	tnership James Malley and	50%	<u></u> %	Unknown
	Ja	ckson Builders, Inc.		50%	%	Unknown
Negot Non-ri ■ No	tiable instruments include negotiable instruments are Give specific information	personal checks, cashie those you cannot transf	ble and non-negotiable instrumers' checks, promissory notes, and rer to someone by signing or deliver	noney orders.		
Exam ■ No	·	SA, Keogh, 401(k), 403((b), thrift savings accounts, or other	pension or profit	t-sharing plans	
⊔ Yes.	List each account separa Type	of account:	Institution name:			
Yours		its you have made so tha	at you may continue service or use olic utilities (electric, gas, water), tele			others
☐ Yes.			Institution name or individual:			
23. Annui I No	ties (A contract for a perio	odic payment of money to	o you, either for life or for a number	of years)		
☐ Yes.	lssuer nan	ne and description.				
26 U.S.	ts in an education IRA, i .C. §§ 530(b)(1), 529A(b),		ified ABLE program, or under a q	jualified state tu	iition program.	
■ No						

Official Form 106A/B Schedule A/B: Property page 4

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

☐ Yes.....

Debtor 1	James E. Malley, III	Document Pa	age 14 of 71		
Debtor 2	Roxanne Lea Malley		Ca	ase number (if known)	
25. Trusts ■ No	, equitable or future interests in	property (other than anything lis	ted in line 1), and	rights or powers exe	ercisable for your benefit
	Give specific information about the	nem			
		e secrets, and other intellectual prisites, proceeds from royalties and li		s	
■ No □ Yes.	Give specific information about the	nem			
Exam _l	ses, franchises, and other generables: Building permits, exclusive lid	al intangibles censes, cooperative association hol	dings, liquor license	es, professional licens	es
■ No □ Yes.	Give specific information about the	nem			
Money or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	funds owed to you Give specific information about th	em, including whether you already f	filed the returns and	I the tax years	
		estimated 2018 tax refund 0 09/2018	1/2018 to	federal	\$1,050.00
30. Other	Give specific information amounts someone owes you ples: Unpaid wages, disability insu benefits; unpaid loans you m	rance payments, disability benefits, nade to someone else	, sick pay, vacation	pay, workers' compe	nsation, Social Security
_	Give specific information				
	sts in insurance policies ples: Health, disability, or life insur	rance; health savings account (HSA)); credit, homeowne	er's, or renter's insura	nce
Yes.	Name the insurance company of		5		
	Company r	iame:	Beneficiary	' :	Surrender or refund value:
	Protective	e Life	Roxanne	Malley	\$0.00
	John Han	ncock	Roxanne	Malley	\$0.00
If you	terest in property that is due yo are the beneficiary of a living trust one has died.	u from someone who has died , expect proceeds from a life insura	nce policy, or are cu	urrently entitled to rec	eive property because
	Give specific information				
Exam		or not you have filed a lawsuit or utes, insurance claims, or rights to s		or payment	
■ No □ Yes.	Describe each claim				

Entered 09/20/18 15:10:47 Case 18-26532 Doc 1 Filed 09/20/18 Desc Main Document Page 15 of 71 Debtor 1 James E. Malley, III Debtor 2 **Roxanne Lea Malley** Case number (if known) 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$5,059.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ No Yes. Give specific information....... office equipment- computer, desk, lamp, 2 chairs, printer/fax, printer \$800.00 table and 4 filing cabinets 54. Add the dollar value of all of your entries from Part 7. Write that number here \$800.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$265,000.00 56. Part 2: Total vehicles, line 5 \$18,600.00 Part 3: Total personal and household items, line 15 \$3,000.00 57. Part 4: Total financial assets, line 36 \$5,059.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$800.00 Total personal property. Add lines 56 through 61... \$27,459.00 Copy personal property total \$27,459.00

Official Form 106A/B Schedule A/B: Property page 6

Total of all property on Schedule A/B. Add line 55 + line 62

\$292,459.00

		17(7(4)111)	111 1 71(1), 1 (7 (7) 7 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	James E. Malley,	III		
	First Name	Middle Name	Last Name	
Debtor 2	Roxanne Lea Ma	lley		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				D. Obest Wilder
(II KNOWN)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

 Which set of exemptions are you claiming? Check one only, even if your spouse is 	s tilina with vai

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
641 Young Ave. Batavia, IL 60510 Kane County	\$265,000.00		\$30,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2011 Buick Enclave 116,000 miles Line from Schedule A/B: 3.2	\$7,700.00		\$4,800.00	735 ILCS 5/12-1001(c)
Line nom Schedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit	
2011 Buick Enclave 116,000 miles Line from Schedule A/B: 3.2	\$7,700.00		\$700.00	735 ILCS 5/12-1001(b)
Ellie Holli Goveaule 77 B. GIZ			100% of fair market value, up to any applicable statutory limit	
household goods and furnishing- 3 couches, 15 chairs, 2 cabinets, 8	\$2,000.00		\$100.00	735 ILCS 5/12-1001(b)
tables, 12 lamps, love seat, desk, 4 beds, 5 dressers and 4 night tables Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
2 TV's Line from Schedule A/B: 7.1	\$200.00		\$50.00	735 ILCS 5/12-1001(b)
LINE HOIN SCREUURE AVD. 1.1			100% of fair market value, up to any applicable statutory limit	

Document Page 17 of 71 James E. Malley, III Debtor 1 **Roxanne Lea Malley** Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B necessary wearing apparel 735 ILCS 5/12-1001(a) \$500.00 100% Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) wedding ring \$300.00 \$130.00 Line from Schedule A/B: 12.1 П 100% of fair market value, up to any applicable statutory limit checking 1676: Harris Bank 735 ILCS 5/12-1001(b) \$2.048.00 \$2,048.00 Line from Schedule A/B: 17.1 П 100% of fair market value, up to any applicable statutory limit checking 6565: Harris Bank; joint 735 ILCS 5/12-1001(b) \$1,348.00 \$674.00 with MacKenzie Malley Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit checking 0571: Harris Bank; joint 735 ILCS 5/12-1001(b) \$2,574.00 \$1,287.00 with Jackson Malley (16 year old son) 100% of fair market value, up to any applicable statutory limit debtor does not contribute funds to this account Line from Schedule A/B: 17.3 federal: estimated 2018 tax refund 735 ILCS 5/12-1001(b) \$1.050.00 \$1,050.00 01/2018 to 09/2018 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit office equipment- computer, desk, 735 ILCS 5/12-1001(d) \$800.00 \$800.00 lamp, 2 chairs, printer/fax, printer table and 4 filing cabinets 100% of fair market value, up to Line from Schedule A/B: 53.1 any applicable statutory limit

3	Are you claiming a	homestead	exemption of	f more than	\$160 3757

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

■ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

□ No

☐ Yes

Case 18-26532 Doc 1 Filed 09/20/18 Entered 09/20/18 15:10:47 Desc Main Document Page 18 of 71 information to identify your case:

Fill in this info	rmation to identify you	r case:	Paue 10	5 ()[7]		
Debtor 1	James E. Malley					
Dobtor 2	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	Roxanne Lea Ma First Name	Middle Name	Last Name			
United States E	Sankruptcy Court for the:	NORTHERN DISTRICT OF ILLII	NOIS			
Case number (if known)					_	if this is an ed filing
Official For	m 106D					
		Who Have Claims S	Secure	d by Property	У	12/15
is needed, copy t number (if knowr	he Additional Page, fill it o	f two married people are filing together ut, number the entries, and attach it to your property?				
☐ No. Che	ck this box and submit th	nis form to the court with your other s	chedules. Y	ou have nothing else to	report on this form.	
Yes Fill	in all of the information b	nelow		· ·	·	
		Jelow.				
	All Secured Claims			Column A	Column B	Column C
for each claim. If	more than one creditor has	nore than one secured claim, list the credi a particular claim, list the other creditors cal order according to the creditor's name.	in Part 2. As Î	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ally Fina	ancial	Describe the property that secures th	e claim:	\$1,380.00	\$7,700.00	\$0.00
PO Box	380901	As of the date you file, the claim is: Capply.				
<u> </u>	oolis, MN 55430	Contingent				
Number, Stre	eet, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
	debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as m	ortgage or se	cured		
Debtor 2 only		car loan)	:-!-!:\			
■ Debtor 1 and	•	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
_	f the debtors and another claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
community		Other (including a right to offset)				
Date debt was in	ncurred	Last 4 digits of account number	er			
Bank of	America Home					
Loans		Describe the property that secures the	e claim:	\$171,700.00	\$265,000.00	\$0.00
Creditor's Na	me	641 Young Ave. Batavia, IL 60 Kane County	0510			
РО Вох	5170	As of the date you file, the claim is: C	heck all that			
	ley, CA 93062	apply. Contingent				
	eet, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the	debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as m car loan)	ortgage or se	cured		
■ Debtor 1 and	Debtor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
_	f the debtors and another	☐ Judgment lien from a lawsuit	,			
	claim relates to a	Other (including a right to offset)				
Date debt was in	ncurred	Last 4 digits of account number	er			

Case 18-26532 Doc 1 Filed 09/20/18 Entered 09/20/18 15:10:47 Desc Main Document Page 19 of 71

Debtor 1			Case nur	mber (if know)		
Debtor 2	First Name Middle Na Roxanne Lea Malley First Name Middle Na					
	rmax	Describe the property that secures the claim	: \$1	11,826.00	\$10,900.00	\$926.00
Cred	ditor's Name	2012 Honda Odyssey 82,000 miles				
_	Box 440609 nnesaw, GA 30160	As of the date you file, the claim is: Check all the apply. Contingent	hat			
Num	ber, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
	es the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor		An agreement you made (such as mortgage car loan)	or secured			
Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	en)			
☐ At leas	at one of the debtors and another	☐ Judgment lien from a lawsuit				
	if this claim relates to a nunity debt	Other (including a right to offset)				
Date debt	was incurred	Last 4 digits of account number				
2.4 FN	вс	Describe the property that secures the claim	: \$7	70,003.00	\$265,000.00	\$0.00
Crec	litor's Name	641 Young Ave. Batavia, IL 60510 Kane County				
	0 W. Burlington Ave. Grange, IL 60525	As of the date you file, the claim is: Check all the apply.	hat			
	uber, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
140111	isor, order, only, orace a zip code	☐ Disputed				
Who owe	es the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor	•	An agreement you made (such as mortgage car loan)	or secured			
	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	en)			
	st one of the debtors and another	☐ Judgment lien from a lawsuit				
	if this claim relates to a nunity debt	Other (including a right to offset)				
Date debt	was incurred	Last 4 digits of account number		<u> </u>		
				4054.000		
	•	olumn A on this page. Write that number here: the dollar value totals from all pages.		\$254,909.0		
	at number here:	tile dollar value totals from all pages.		\$254,909.	00	
Part 2:	List Others to Be Notified fo	r a Debt That You Already Listed				
trying to than one	collect from you for a debt you o	e notified about your bankruptcy for a debt tha we to someone else, list the creditor in Part 1, you listed in Part 1, list the additional creditor is page.	and then list th	e collection agen	icy here. Similarly, if you	have more
	me, Number, Street, City, State & 2	•	On which line in P	art 1 did you enter	r the creditor?	
PC	ank of America Home Loa D Box 5170 anta Cruz, CA 95062		ast 4 digits of ac	count number		

				ent Page 20 of 71	
FIII	n this information t	o identify your case	Docume :		
Debt	or 1 Jam	nes E. Malley, III			
DODE	First N		Middle Name	Last Name	
Debt	or 2 Rox	anne Lea Malley			
(Spou	se if, filing) First N	lame	Middle Name	Last Name	
Unite	d States Bankruptcy	Court for the: NC	ORTHERN DISTRICT	T OF ILLINOIS	
Case	number				
(if kno	wn)				☐ Check if this is an
					amended filing
⊃ffi.	cial Form 106	F/F			
		reditors Who	Have Unsecu	ured Claims	12/15
				PRIORITY claims and Part 2 for creditors with N	
ched eft. A ame	ule D: Creditors Who tach the Continuation and case number (if k	Have Claims Secured n Page to this page. If y known).	by Property. If more sp you have no information	106G). Do not include any creditors with partial pace is needed, copy the Part you need, fill it o on to report in a Part, do not file that Part. On the	ut, number the entries in the boxes on the
Part		ur PRIORITY Unsecu			
	o any creditors have	priority unsecured ciai	ims against you?		
_	■				
ı	No. Go to Part 2.				
	Yes.	NONDRIODITY III			
[Part	Yes. 2: List All of You	ur NONPRIORITY Ur			
E Part 3. E	Yes. 2: List All of You on any creditors have	nonpriority unsecured	claims against you?		
E Part 3. E	Yes. 2: List All of You o any creditors have	nonpriority unsecured	claims against you?	ourt with your other schedules.	
[Part 3. [Yes. 2: List All of You o any creditors have	nonpriority unsecured	claims against you?	ourt with your other schedules.	
Part 3. C 1 4. L u th	Yes. 2: List All of You on any creditors have No. You have nothin Yes. ist all of your nonpricensecured claim, list the	nonpriority unsecured g to report in this part. S prity unsecured claims creditor separately for e	ubmit this form to the co in the alphabetical orceach claim. For each claim.	ourt with your other schedules. der of the creditor who holds each claim. If a craim listed, identify what type of claim it is. Do not lis 3.If you have more than three nonpriority unsecure	st claims already included in Part 1. If more
Part 3. C 4. L the state of t	Yes. 2: List All of You o any creditors have No. You have nothin Yes. ist all of your nonprionsecured claim, list the nan one creditor holds a	nonpriority unsecured g to report in this part. S prity unsecured claims creditor separately for e	ubmit this form to the co in the alphabetical orceach claim. For each claim.	der of the creditor who holds each claim. If a craim listed, identify what type of claim it is. Do not lis	st claims already included in Part 1. If more
Part [L L L L L L L L L L L L	Yes. 2: List All of You o any creditors have No. You have nothin Yes. ist all of your nonprionsecured claim, list the nan one creditor holds a	g to report in this part. S prity unsecured claims creditor separately for ea	in the alphabetical order contact claim. For each claim. For each claim contact contact can be other creditors in Part 3	der of the creditor who holds each claim. If a craim listed, identify what type of claim it is. Do not lis	at claims already included in Part 1. If more end claims fill out the Continuation Page of Total claim
Part [L L L L L L L L L L L L	Yes. List All of You o any creditors have No. You have nothin Yes. ist all of your nonprionsecured claim, list the lan one creditor holds a art 2. American Exp Nonpriority Creditor	g to report in this part. S prity unsecured claims creditor separately for ea particular claim, list the	ubmit this form to the co in the alphabetical orceach claim. For each cla e other creditors in Part 3	der of the creditor who holds each claim. If a creation listed, identify what type of claim it is. Do not lis 3.If you have more than three nonpriority unsecure so of account number	at claims already included in Part 1. If more end claims fill out the Continuation Page of Total claim
Part [L L L L L L L L L L L L	Yes. List All of You o any creditors have No. You have nothin Yes. ist all of your nonprionsecured claim, list the nan one creditor holds a art 2. American Exp Nonpriority Creditor PO Box 98153	g to report in this part. S prity unsecured claims creditor separately for ea particular claim, list the press r's Name 5	ubmit this form to the co in the alphabetical orceach claim. For each cla e other creditors in Part 3	der of the creditor who holds each claim. If a craim listed, identify what type of claim it is. Do not lis 3.If you have more than three nonpriority unsecure	at claims already included in Part 1. If more end claims fill out the Continuation Page of Total claim
Part [L L L L L L L L L L L L	Yes. List All of You o any creditors have No. You have nothin Yes. ist all of your nonprionsecured claim, list the lan one creditor holds a art 2. American Exp Nonpriority Creditor	prity unsecured claims creditor separately for ea particular claim, list the ress r's Name 5 9998-1535	ubmit this form to the color in the alphabetical order claim. For each claim e other creditors in Part 3	der of the creditor who holds each claim. If a creation listed, identify what type of claim it is. Do not lis 3.If you have more than three nonpriority unsecure so of account number	at claims already included in Part 1. If more end claims fill out the Continuation Page of Total claim
Part [L L L L L L L L L L L L	Yes. List All of You o any creditors have No. You have nothin Yes. ist all of your nonpric nsecured claim, list the nan one creditor holds a art 2. American Exp Nonpriority Creditor PO Box 98153 El Paso, TX 79	g to report in this part. S prity unsecured claims creditor separately for ea particular claim, list the press r's Name 5 1998-1535 State Zlp Code	ubmit this form to the color in the alphabetical order claim. For each claim e other creditors in Part 3	der of the creditor who holds each claim. If a creation listed, identify what type of claim it is. Do not list 3. If you have more than three nonpriority unsecure soft account number the debt incurred?	at claims already included in Part 1. If more end claims fill out the Continuation Page of Total claim
Part [L L L L L L L L L L L L	Yes. List All of You o any creditors have No. You have nothin Yes. ist all of your nonpric nsecured claim, list the nan one creditor holds a art 2. American Exp Nonpriority Creditor PO Box 98153 El Paso, TX 79 Number Street City	g to report in this part. S prity unsecured claims creditor separately for ea particular claim, list the press r's Name 5 1998-1535 State Zlp Code	in the alphabetical ordered claims. For each claim. For each claim. For each claim. East 4 digits. When was to	der of the creditor who holds each claim. If a craim listed, identify what type of claim it is. Do not lis 3. If you have more than three nonpriority unsecure as of account number the debt incurred? ate you file, the claim is: Check all that apply	at claims already included in Part 1. If more end claims fill out the Continuation Page of Total claim
Part [L L L L L L L L L L L L	List All of You o any creditors have No. You have nothin Yes. ist all of your nonpric nsecured claim, list the nan one creditor holds a art 2. American Exp Nonpriority Creditor PO Box 98153 El Paso, TX 79 Number Street City Who incurred the	g to report in this part. S prity unsecured claims creditor separately for ea particular claim, list the press r's Name 5 1998-1535 State Zlp Code	in the alphabetical ore each claim. For each claim. For each claim and the content of the conten	der of the creditor who holds each claim. If a creatin listed, identify what type of claim it is. Do not lis 3. If you have more than three nonpriority unsecure so of account number the debt incurred? ate you file, the claim is: Check all that apply the count is t	at claims already included in Part 1. If more and claims fill out the Continuation Page of
Part [L L L L L L L L L L L L	List All of You o any creditors have No. You have nothin Yes. ist all of your nonpric nsecured claim, list the nan one creditor holds a art 2. American Exp Nonpriority Creditor PO Box 98153 EI Paso, TX 79 Number Street City Who incurred the Debtor 1 only Debtor 2 only	prity unsecured claims creditor separately for ea particular claim, list the ress r's Name 5 9998-1535 State Zlp Code debt? Check one.	in the alphabetical ordered claims. For each claim. For each claim and the other creditors in Part 3 Last 4 digits When was to As of the da	der of the creditor who holds each claim. If a cream listed, identify what type of claim it is. Do not lis 3. If you have more than three nonpriority unsecure as of account number the debt incurred? ate you file, the claim is: Check all that apply the debt incurred ated	at claims already included in Part 1. If more and claims fill out the Continuation Page of Total claim
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Part [L L L L L L L L L L L L	American Exp Nonpriority Creditor PO Box 98153 EI Paso, TX 79 Number Street City Who incurred the Debtor 1 and De At least one of t	g to report in this part. S prity unsecured claims or creditor separately for ea particular claim, list the press r's Name 5 9998-1535 State Zlp Code debt? Check one.	ubmit this form to the continue alphabetical order creditors in Part 3 Last 4 digits When was to Continue Unliquida Unliquida Type of NOise	der of the creditor who holds each claim. If a creaim listed, identify what type of claim it is. Do not lis 3. If you have more than three nonpriority unsecure as of account number the debt incurred? ate you file, the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the claim is: Check all that apply ent ated the county of the check all the claim is: Check all that apply ent ated the check all t	to claims already included in Part 1. If more and claims fill out the Continuation Page of Total claim \$6,742.00
Part [L L L L L L L L L L L L	American Exp Nonpriority Creditor PO Box 98153 EI Paso, TX 79 Number Street City Who incurred the Debtor 1 only Debtor 1 and Do At least one of t Check if this cl debt Is the claim subjet	prity unsecured claims or creditor separately for ea particular claim, list the separately for each claim is for a communit	ubmit this form to the color in the alphabetical order chack claim. For each claim and the color chack claim. Continge and the color chack claim.	der of the creditor who holds each claim. If a creatin listed, identify what type of claim it is. Do not lis 3. If you have more than three nonpriority unsecured as of account number the debt incurred? ate you file, the claim is: Check all that apply ent ated of INPRIORITY unsecured claim: loans ons arising out of a separation agreement or divorciority claims	to claims already included in Part 1. If more and claims fill out the Continuation Page of Total claim \$6,742.00 The continuation Page of the continuation Page of the claim to the continuation Page of the claim to the claim to the continuation Page of the claim to the claim
Part 3. C 1 4. L u th	American Exp Nonpriority Creditor PO Box 98153 EI Paso, TX 79 Number Street City Who incurred the Debtor 1 only At least one of t Check if this cl debt	prity unsecured claims or creditor separately for ea particular claim, list the separately for each claim is for a communit	ubmit this form to the color in the alphabetical order chack claim. For each claim and the color chack claim. Continge and the color chack claim.	der of the creditor who holds each claim. If a creatin listed, identify what type of claim it is. Do not lis 3. If you have more than three nonpriority unsecure is of account number the debt incurred? ate you file, the claim is: Check all that apply ent ated definitions are considered claim: loans ons arising out of a separation agreement or divorced.	to claims already included in Part 1. If more and claims fill out the Continuation Page of Total claim \$6,742.00 The continuation Page of the continuation Page of the claim to the continuation Page of the claim to the claim to the claim to the claim the continuation Page of the claim to

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	or 1 James E. Malley, III Roxanne Lea Malley	Case number (if know)	
4.2	American Express	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name PO Box 0001 Los Angeles, CA 90096	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify phone service	
4.3	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	\$2,162.00
	PO Box 31785 Tampa, FL 33634	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify revolving account	
4.4	Cadence Health	Last 4 digits of account number	\$491.00
	Nonpriority Creditor's Name 25 N. Winfield Road Winfield, IL 60190	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify medical services	

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Roxanne Lea Malley	Case number (if know)	
Cadence Health	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name 25 N. Winfield Road Winfield, IL 60190	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify notice only	
Cadence Health	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name	When was the debt incurred?	
Carol Stream, IL 60197		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify notice only	
Conital One	Last 4 digits of account number	\$35,300,00
Capital One Nonpriority Creditor's Name		\$35,300.00
PO Box 6492	When was the debt incurred?	
Carol Stream, IL 60197	- As file has a file described OL I like a si	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	

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Debtor	Potent 2 Roxanne Lea Malley Case number (if know)					
4.8	Capital One	Last 4 digits of account number	\$0.00			
	Nonpriority Creditor's Name PO Box 6492	When was the debt incurred?				
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	□ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify notice only				
4.9	Capital One Bank (USA), N.A.	Last 4 digits of account number	\$2,745.00			
	Nonpriority Creditor's Name	When we she debt incorred?				
	c/o Blitt & Gaines, P.C. 661 Glenn Ave.	When was the debt incurred?				
	Wheeling, IL 60090					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	□ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify revolving account				
44						
4.1 0	Chase	Last 4 digits of account number	\$13,045.00			
	Nonpriority Creditor's Name PO Box 15298 Wilmington, DE 19850-5298	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes ☐ Other. Specify Disney					

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otor 2 Roxanne Lea Malley	Case number (if know)	
Chase	Last 4 digits of account number	\$9,523.00
Nonpriority Creditor's Name PO Box 15298 Wilmington, DE 19850-5298	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify United	
Discover Bank	Last 4 digits of account number	\$12,799.00
Nonpriority Creditor's Name		. ,
c/o Blitt & Gaines, P.C.	When was the debt incurred?	
661 Glenn Avenue Wheeling, IL 60090		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify revolving account	
Dish Network	Last 4 digits of account number	\$165.00
Nonpriority Creditor's Name 9601 S. Meridian Boulevard	When was the debt incurred?	•
Englewood, CO 80112	As the late of the developed Object Hills	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Continuent	
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
_	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Под 1 и	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	_	
— 169	Other. Specify	

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	1 James E. Malley, III 2 Roxanne Lea Malley	Case number (if know)	
4.1	Kohl's	Last 4 digits of account number	\$724.00
<u>. </u>	Nonpriority Creditor's Name PO Box 3043	When was the debt incurred?	
	Milwaukee, WI 53201		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
	_	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify revolving account	
4.1 5	Lemont Village Hall	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 418 Main Street Lemont. IL 60439	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Macy's	Last 4 digits of account number	\$450.00
6	Nonpriority Creditor's Name PO Box 183083	When was the debt incurred?	· ·
	Columbus, OH 43218	=	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	<u> </u>	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify revolving account	

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Roxanne Lea Malley	Case number (if know)	
MCS Collections, Inc.	Last 4 digits of account number	\$657.00
Nonpriority Creditor's Name PO Box 7699	Last 4 digits of account number When was the debt incurred?	Ψ001.00
Chicago, IL 60680		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
<u>_</u>	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
⊒ Yes	Other. Specify	
Nationwide Credit & Collection, Inc	Last 4 digits of account number	\$600.00
Nonpriority Creditor's Name		
315 Commerce Drive, Suite 270 Oak Brook, IL 60523	When was the debt incurred?	
lumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Cadence Health	
QVC/Synchrony Bank	Last 4 digits of account number	\$1,943.00
Nonpriority Creditor's Name PO Box 965020	When was the debt incurred?	
Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans	
in Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify revolving account	

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Debtor 1 James E. Malley, III

Debtor 2 Roxanne Lea Malley		Case number (if know)				
4.2						
0	U.S. Bank	Last 4 digits of account number	\$59,511.00			
	Nonpriority Creditor's Name PO Box 4412	When was the debt incurred?				
	Portland, OR 97208					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Iine of credit Mackenzie Graphics				
4.2	U.S. Bank	Last 4 digits of account number	\$6,481.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	PO Box 1800 Saint Paul, MN 55101	when was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.2	Wells Fargo	Last 4 digits of account number	\$0.00			
	Nonpriority Creditor's Name					
	PO Box 54349	When was the debt incurred?				
	Los Angeles, CA 90054 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	7.6 of the date you me, the stannier officers and that appropri				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify notice only				

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Debtor 1 Debtor 2	James E. Malley, III Roxanne Lea Malley	Case number (if know)	
4.2 3 V	Vells Fargo	Last 4 digits of account number	\$17,900.00
	onpriority Creditor's Name O Box 77033	When was the debt incurred?	
N	Iinneapolis, MN 55408 umber Street City State Zlp Code /ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	ebt the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

T. (. 1 O

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				_
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	0-	Obligations wising out of a consenting account of the state of the sta		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	, , ,	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 171,738.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 171,738.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		17(7(4)1111)	111 1 (1111. 7 3 111 1 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	James E. Malley,	III		
	First Name	Middle Name	Last Name	
Debtor 2	Roxanne Lea Mal	lley		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			whom you have the cr, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIP Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	<u> </u>				
	Name				_
	Number	Street			
	City		State	ZIP Code	
	Jily .		Olulo		

		Docume	ent Pade 30 d)T / I	
Fill in this	information to identify your				
Debtor 1	James E. Malley,	III			
20010	First Name	Middle Name	Last Name		
Debtor 2	Roxanne Lea Ma	lley			
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	hor				
(if known)					☐ Check if this is an
					amended filing
O (()	. =				
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
	and case number (if known)			as a codebtor.	
■ No □ Yes	S				
	hin the last 8 years, have you a, California, Idaho, Louisiana				
=	0				
`	. Go to line 3. s. Did your spouse, former spo	use or legal equivalent live	with you at the time?		
L res	s. Dia your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only i	if that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor	ID O- d-			editor to whom you owe the debt
	Name, Number, Street, City, State and Z	ir Code		Check all schedule	es tnat apply:
3.1				☐ Schedule D, lin	ne
	Name			□ Schedule E/F,	
				☐ Schedule G, lin	ne
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, lin	ne.
	Name			_ ☐ Schedule E/F,	
				☐ Schedule G, lin	
-	Number Street			_	
	City	State	ZIP Code		

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=:11	in this information	to identify your o	200:								
	in this information to the store that the store tha	James E. Ma									
	btor 2 buse, if filing)	Roxanne Le	a Malley								
Uni	ited States Bankrup	otcy Court for the	: NORTHERN DISTRIC	CT OF IL	LINOIS						
(If kr	se number			-		Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:					
_	fficial Form						Ī	MM / DD/ Y	YYYY		
	chedule I:		OME sible. If two married peo								12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	are married and not fili r spouse is not filing w On the top of any additi	ng jointl ith you,	ly, and your spouse do not include info	e is livi ormatio	ing with on abou	you, incl t your spe	ude inf ouse. If	formation a	bout your ce is needed,
1.	Fill in your emplinformation.	oyment		Debto	or 1		Debtor 2 or non-filing spouse				
	If you have more	ate page with	F	■ Employed				☐ Empl	oyed		
	attach a separate prinformation about a employers.		Employment status	☐ Not employed			■ Not employed				
			Occupation	printing broker							
	Include part-time self-employed wo		Employer's name	Mack	kenzie Graphics						
	Occupation may or homemaker, if		Employer's address		oung Ave. via, IL 60510						
			How long employed t	here?	19 years			_			
Pai	rt 2: Give De	tails About Mor	nthly Income								
	mate monthly incuse unless you are		ate you file this form. If	you have	e nothing to report fo	or any li	ine, write	e \$0 in the	space	. Include yo	ur non-filing
	ou or your non-filing e space, attach a s		ore than one employer, co	ombine t	he information for al	ll emplo	yers for	that perso	on on th	ne lines belo	w. If you need
							For De	btor 1		Debtor 2 o -filing spou	
2.			ry, and commissions (b			. \$	8	3,497.00	\$	(0.00

3.

+\$

\$

0.00

0.00

0.00

8,497.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

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	tor 1 tor 2	James E. Malley, III Roxanne Lea Malley	-		Cas	e number (<i>if ki</i>	nown)	_				
					Fo	or Debtor 1				ebtor 2		
	Сор	y line 4 here	4.		\$	8,497	7.00		\$		0.00	-
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	а.	\$	(0.00		\$		0.00	
	5b.	Mandatory contributions for retirement plans	5k		\$		0.00	-	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$		0.00	-	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$		0.00	-	\$		0.00	_
	5e.	Insurance	56	€.	\$	(0.00		\$		0.00	_
	5f.	Domestic support obligations	5f		\$	(0.00		\$		0.00	_
	5g.	Union dues	50	g.	\$		0.00	_	\$		0.00	_
	5h.	Other deductions. Specify:	_ 5h	า.+	\$_	(0.00	. +	\$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	(0.00	_	\$		0.00	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	8,497	7.00	_	\$		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0		•				•			
	O.L.	monthly net income.	88		\$_		0.00	-	\$		0.00	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8k 8d		\$_ \$		0.00	-	\$ \$		0.00	_
	8d.	Unemployment compensation	80		φ_ \$		0.00 0.00	-	\$		0.00	_
	8e.	Social Security	86		\$ \$		0.00	-	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income		:	\$_ \$_	().00).00	-	\$ \$		0.00	_
	8h.	Other menthly income Consider		ษ. า.+	· · -		0.00	_	\$		0.00	_
_			_	Г				- 1 Г				-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	(0.00] [\$		0.0	0
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		8,497.00	+ \$			0.00	= \$	8,497.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-		0,401.00				0.00	-	0,407.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	dep							hedule . 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies								12.	\$	8,497.00
13.	Do y	ou expect an increase or decrease within the year after you file this form	?								Combi nonth	ned y income
		No. Yes. Explain:						—				

Fill	in this informa	tion to identify yo	our case:							
Deb	otor 1	James E. Ma	lley, III		Check if this is:					
							An amended filing			
	otor 2	Roxanne Lea	a Malley				A supplement show 13 expenses as of	ving postpetition chapter		
(Sp	ouse, if filing)						13 expenses as or	the following date.		
Unit	ted States Bankr	ruptcy Court for the:	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY			
	se number									
(If k	nown)									
O.	fficial Fo	rm 106J								
S	chedule	J: Your I	Exner	2421				12/1		
Be info nur	as complete ormation. If member (if know	and accurate as lore space is ne n). Answer ever	possible. eded, atta ry question	If two married people ar ch another sheet to this				or supplying correct		
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold							
١.	□ No. Go to									
	_	s Debtor 2 live i	in a conar	ata hausahald?						
			ii a sepaia	ate flouseffold:						
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	otor 2.			
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not otato	tha						□ No		
	Do not state dependents				Son		10	■ Yes		
	·							□No		
					Son		16	■ Yes		
								□ No		
								☐ Yes		
								□ No		
3.	expenses o	penses include f people other tl d your depende	han $_{\square}$	No Yes				☐ Yes		
Est exp app	t 2: Estim timate your ex penses as of a plicable date.	eate Your Ongoin expenses as of your a date after the b	ng Monthl our bankru bankruptc	y Expenses uptcy filing date unless y y is filed. If this is a supp	olemental <i>Schedule</i>	orm as a su e <i>J</i> , check t	upplement in a Cha he box at the top o	apter 13 case to report f the form and fill in the		
the		h assistance and		luded it on Schedule I:			Your exp	enses		
4.		or home owners		ses for your residence. I r lot.	nclude first mortgag	e 4. \$	\$	2,180.00		
	If not include	led in line 4:								
	4a. Real e	estate taxes				4a. S	\$	0.00		
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00		
		maintenance, re				4c.	: 	67.00		
E		owner's associat		dominium dues	and a model to the con-	4d. 5	·	0.00		
7	AUGUTIONALI	HOLLONGE DAVMS	-urs int ve	III TESIDEDCE CHANGE NA	THE EURINA IVANC	~ ·	מ	7U5 IIII		

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	Malley, III			
ebtor 2 Roxanne	Lea Malley	Case num	nber (if known)	
Utilities:				
6a. Electricity,	heat, natural gas	6a.	\$	400.00
6b. Water, sew	ver, garbage collection	6b.	\$	75.00
6c. Telephone	, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d. Other. Spe	cify:	6d.	\$	0.00
Food and house	keeping supplies	7.	\$	1,733.00
Childcare and c	hildren's education costs	8.	\$	984.00
Clothing, laundr	ry, and dry cleaning	9.	\$	80.00
Personal care p	roducts and services	10.	\$	110.00
Medical and der	ital expenses	11.	\$	125.00
	Include gas, maintenance, bus or train fare.	40	c	300.00
Do not include ca		12.		
	clubs, recreation, newspapers, magazines, and books	13.	·	250.00
	ibutions and religious donations	14.	\$	160.00
Insurance.	surance deducted from your pay or included in lines 4 or 20.			
15a. Life insura		15a.	\$	110.00
15b. Health insu		15b.	· —	0.00
15c. Vehicle ins		15c.	· <u> </u>	260.00
15d. Other insur		15d.		0.00
	clude taxes deducted from your pay or included in lines 4 or 2			0.00
Specify:	saas tares assassa ristri year pay or merassa ri miss ristr	16.	\$	0.00
Installment or le		170	¢.	460.00
. ,		17a.	·	460.00
17b. Car payme		17b.	·	459.00
17c. Other. Spe17d. Other. Spe		17c. 17d.	·	0.00
•	of alimony, maintenance, and support that you did not re		Ψ	0.00
	our pay on line 5, Schedule I, Your Income (Official Form		\$	0.00
	you make to support others who do not live with you.	,	\$	0.00
Specify:		19.		
	erty expenses not included in lines 4 or 5 of this form or c			
	on other property	20a.	·	0.00
20b. Real estate		20b.	· <u> </u>	0.00
	omeowner's, or renter's insurance	20c.	·	0.00
	ce, repair, and upkeep expenses	20d.	· -	0.00
20e. Homeowne	er's association or condominium dues	20e.	·	0.00
Other: Specify:	tax preparer	21.	+\$	50.00
vitamins			+\$	25.00
Calculate your n	nonthly expenses			
22a. Add lines 4	through 21.		\$	8,323.00
22b. Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	_
22c. Add line 22a	and 22b. The result is your monthly expenses.		\$	8,323.00
Calculate your n	nonthly net income.			
	12 (your combined monthly income) from Schedule I.	23a.	\$	8,497.00
• •	monthly expenses from line 22c above.	23b.		8,323.00
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- '			-,
	our monthly expenses from your monthly income.	00	¢	174.00
The result	is your monthly net income.	23c.	\$	174.00
For example, do yo	In increase or decrease in your expenses within the year u expect to finish paying for your car loan within the year or do you exerms of your mortgage?			ase or decrease because of
No.				
П Уез	Explain here:			

	4					
Fill in this ir	nformation to identify your	case:				
Debtor 1	James E. Malley,	III				
	First Name	Middle Name	Las	t Name		
Debtor 2	Roxanne Lea Ma					
(Spouse if, filing)) First Name	Middle Name	Las	t Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINO	S		
Case number	er					
(if known)						☐ Check if this is an
						amended filing
Official E	form 106Dec					
Declar	ration About a	an Individua	I Debte	or's	Schedules	12/15
ears, or bot	th. 18 U.S.C. §§ 152, 1341, 1		in uptoy cas	c can i	esuit iii iiiies up to 4250,c	000, or imprisonment for up to 20
Did you	u pay or agree to pay some	one who is NOT an atto	orney to help	you fil	l out bankruptcy forms?	
■ No	0					
☐ Ye	es. Name of person				Attach Bai	nkruptcy Petition Preparer's Notice,
					Declaratio	n, and Signature (Official Form 119)
that the	penalty of perjury, I declare y are true and correct.	that I have read the sur	•			ion and
	James E. Malley, III nes E. Malley, III		^		oxanne Lea Malley nne Lea Malley	
	nature of Debtor 1				ure of Debtor 2	
Date				Date	September 20, 2018	
_ ~.	30p.0301 20, 2010					

Filli	n this inforn	nation to identify your	case:			
Deb	or 1	James E. Malley	. III			
		First Name	Middle Name	Last Name		
Deb	or 2 se if, filing)	Roxanne Lea Ma First Name	Middle Name	Last Name		
(Spot	se II, IIIIng)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case (if kno	e number wn)				_	theck if this is an mended filing
Sta		of Financial		duals Filing for B		4/16
infor numl	mation. If moer (if know)	ore space is needed, n). Answer every ques	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup y additional pages, write you	
Part	<u> </u>		rital Status and Where Yoເ	Lived Before		
1.	What is you	r current marital statu	s?			
	■ Married □ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	■ No	La como como Cill cont. Oct	- 1 de 11 Venez Oe de la com (O	(finite France 4001)		
	☐ Yes. Ma	ike sure you till out Sch	edule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
	Fill in the tota	l amount of income you	received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions,	\$67,978.50	☐ Wages, commissions, bonuses, tips	\$0.00
tile .	-		bonuses, tips		bonuses, tips	

Official Form 107

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Debtor 1 James E. Malley, III
Debtor 2 Roxanne Lea Malley

Case number (if known)

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	☐ Wages, commissions, bonuses, tips	\$71,118.00	☐ Wages, commissions, bonuses, tips	\$0.0
	Operating a business		☐ Operating a business	
or last calendar year: lanuary 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$50,098.00	☐ Wages, commissions, bonuses, tips	\$0.0
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$53,146.00	☐ Wages, commissions, bonuses, tips	\$0.0
	Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$989.00	☐ Wages, commissions, bonuses, tips	\$0.0
	Operating a business		☐ Operating a business	
or the calendar year before that: anuary 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$50,905.00	☐ Wages, commissions, bonuses, tips	\$0.0
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$43,474.00	☐ Wages, commissions, bonuses, tips	\$0.0
	Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$-298.0
	☐ Operating a business		Operating a business	
Did you receive any other incom Include income regardless of whet and other public benefit payments; winnings. If you are filing a joint call List each source and the gross income No	her that income is taxable. Exa pensions; rental income; inter se and you have income that y	amples of other income are a est; dividends; money collec- rou received together, list it o	ted from lawsuits; royalties; and single once under Debtor 1.	
	Debter 4		Dobtor 2	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
or last calendar year: January 1 to December 31, 2017)	tax refund	\$2,847.00		

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Dο	btor 1	laı	nes E. Ma	llev III	Document 1	age 30 of 71	-		
	btor 2		xanne Lea			Cas	se number (if known)		
				•					
Pa	rt 3:	List	Certain Pa	yments You Made Befo	ore You Filed for Bankrup	otcy			
6.	Aro oi	ithor	Dobtor 1's	or Dobtor 2's dobts or	imarily consumer debts?	•			
0.	_	No.		•	•		ts are defined in 11	U.S.C. § 101(8) as "incurred	hy an
	_ '	NO.			family, or household purpo		is are defined in Ti	0.5.C. § 101(6) as incurred	by an
			Described the	00 days hafanayay (flad	l Camba alamatan al'alamana		- L - ((C) 405*	0	
			No.	Go to line 7.	I for bankruptcy, did you pa	ly any creditor a tota	ai of \$6,425" of mo	re?	
			☐ Yes		or to whom you paid a total	of \$6.425* or more	in one or more na	ments and the total amount y	/ 011
			_ 103	paid that creditor. Do n	not include payments for do	mestic support obliq		nild support and alimony. Also	
			* Subject t		to an attorney for this bank I and every 3 years after th		or after the date of	of adjustment	
			•	•	, ,		i or after the date t	n adjustment.	
		res.			e primarily consumer de l I for bankruptcy, did you pa		al of \$600 or more	>	
			•	oo dayo bololo you mod	i for barna aptoy, and you pe	y arry ordanor a tota	21 OI 4000 OI IIIOIO		
			□ No.	Go to line 7.					
			☐ Yes					you paid that creditor. Do not	
				attorney for this bankru		s, such as child sup	port and allmony.	Also, do not include payments	s to an
				·					
	Cred	itor's	s Name and	d Address	Dates of payment	Total amount	Amount you	Was this payment for	
						paid	still owe		
7.	<i>Inside</i> of whi	ers ind ch yo iness	clude your rou ou are an off	elatives; any general par ficer, director, person in	control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and a	was all fisider; corports are a general partner; corports managing agent, including s, such as child support and	
		No							
	_		List all paym	nents to an insider.					
			Name and		Dates of payment	Total amount	Amount you	Reason for this payment	
						paid	still owe		
8.	inside	er? ´		you filed for bankrupto debts guaranteed or cosi		ments or transfer a	any property on a	ccount of a debt that benefi	ted an
		No							
			ist all paym	nents to an insider					
			Name and		Dates of payment	Total amount	Amount you	Reason for this payment	
					p p p	paid	still owe	Include creditor's name	
Pa	rt 4:	lden	tify Legal A	Actions, Repossession	s. and Foreclosures				
9.	List al	l suc	h matters, ir		cy, were you a party in an cases, small claims actions				
		No							
	■ Y	res. I	Fill in the de	etails.					
	Case				Nature of the case	Court or agency		Status of the case	
				ank v. Jackson	foreclosure	Circuit Court fo	or the	☐ Pending	
				es E. Maalley, III		Twenty-Third	. Kandell	☐ On appeal	
				lalley, Jason B. ie L. Malley		Judicial Circuit County	t, Kendali	Concluded	
			0123	o Li mulicy		807 W John St. Yorkville, IL			

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James E. Malley, III Debtor 1 Debtor 2 Roxanne Lea Malley

Case number (if known)

			_			
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
	Discover Bank v. Roxanne Walton	credit card debt	Circuit Ct for the 16th		■ Pending	I
	Malley		Judicial Circuit		On appe	eal
	18-AR-000187		Kane County Courthous 100 S. 3rd Street	е	☐ Conclud	led
			Geneva, IL 60134			
	Capital One Bank (USA), N.A. v.		Circuit Ct for the 18th		■ Pending	I
	Roxanne L. Malley and James E.		Judicial Circuit	_	On appe	eal
	Malley 18-SC-002992		Kane County Courthous 100 S. 3rd Street	E	☐ Conclud	led
	10-00-002332		Geneva, IL 60134			
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		rty repossessed, foreclosed,	garnishe Date	ed, attache	d, seized, or levied? Value of the property
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or financial inst	itution, s	set off any	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date ac	tion was	Amount
	Ground: Name and Address		ordanor took	taken	alon was	7 illi Galit
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an		rty in the possession of an as	ssignee 1	for the ben	efit of creditors, a
	■ No					
	☐ Yes					
Par	t 5: List Certain Gifts and Contributions					
rai	List Certain Girts and Contributions					
13.	Within 2 years before you filed for bankrupt	cy, did you give any gifts	with a total value of more the	an \$600	per person	?
	NoYes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600	Describe the gifts		Dates v	ou gave	Value
	per person	Describe the girls		the gift	_	Value
	Person to Whom You Gave the Gift and					
	Address:					
14.	Within 2 years before you filed for bankrupt ■ No	cy, did you give any gifts	or contributions with a total	value of	more than	\$600 to any charity?
	$\ \square$ Yes. Fill in the details for each gift or cont	ribution.				
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you	contributed	Dates y contrib		Value

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Debtor 1 James E. Malley, III Debtor 2 **Roxanne Lea Malley** Case number (if known) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You William Teitelbaum & Donald Leibsker \$2,500.00 **Attorney Fees** William Teitelbaum \$1,250.00 c/o Donald Leibsker 10 S. LaSalle Street, Suite 1230 Donald Leibsker \$1,250.00 Chicago, IL 60603 lawbrt@aol.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ☐ No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you FNBC Bank & Trust F/K/A State Bank of Lots 27 & 195 Whitetail Settlement of mortgage November 28. 2017 settlement IL Ridge Subdivision, Kendall foreclosure County, IL. PIN **Defendant Jason Malley** 620 W. Burlington Ave. date La Grange, IL 60525 06-07-228-004-000 and paid the sum of \$60,000 06-07-226-004-000. to FNC Bank & Trust. mortgagee Real Estate- 6 E. Logan St. Lemont, IL. PIN 22-29-100-015-000.

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Debtor 1 James E. Malley, III
Debtor 2 Roxanne Lea Malley

Case number (if known)

19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote		y property to	a self-settle	ed trust or similar device o	of which you are a			
	Yes. Fill in the details. Name of trust	Description and v	alue of the p	roperty trans	sferred	Date Transfer was made			
Par	t8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and	Storage Uni	ts				
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accour	nts; certificate	es of depos					
	Yes. Fill in the details.								
		ast 4 digits of account number	Type of accinstrument	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy,	any safe de	posit box or other deposi	tory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within	1 year befo	re you filed for bankrupto	y?			
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?			
Par	9: Identify Property You Hold or Control fo	or Someone Else							
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ide any prop	erty you bor	rowed from, are storing f	or, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	the property	Value			
Par	10: Give Details About Environmental Inform	mation							
For	he purpose of Part 10, the following definition	ns apply:							
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	water, grou	• .					
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	as defined under any e		ıl law, wheth	ner you now own, operate	, or utilize it or used			
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 James E. Malley, III
Debtor 2 Roxanne Lea Malley

Case number (if known)

 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ■ No □ Yes. Fill in the details. 										
	Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Code Governmental unit Address (Number, Street, City, State and ZIP Code) Know it									
25.	=	e you notified any governmental unit of No	any	release of hazardous material?						
		Yes. Fill in the details. me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)		Environme know it	ntal law, if you	Date of notice		
26.		e you been a party in any judicial or adr No Yes. Fill in the details.	minis	trative proceeding under any env						
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the o	case	Status of the case		
Par	11:	Give Details About Your Business or	Coni	nections to Any Business						
27.	With	nin 4 years before you filed for bankrup	tcy, d	lid you own a business or have ar	ny of	the followin	ng connections to any	business?		
		■ A sole proprietor or self-employed i	in a tı	rade, profession, or other activity	, eith	er full-time	or part-time			
		☐ A member of a limited liability comp	any	(LLC) or limited liability partnersh	nip (L	LP)				
		■ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the votin	g or	equity securities of a corporation						
		No. None of the above applies. Go to l	Part 1	2.						
		Yes. Check all that apply above and fil	l in th	ne details below for each busines	s.					
		siness Name dress	Des	scribe the nature of the business			Identification number			
		nber, Street, City, State and ZIP Code)	Nai	ne of accountant or bookkeeper		Dates business existed				
	Ja	ckson Builders	ho	me construction		EIN:	02-0636504			
	641 Young Ave. Batavia, IL 60510		200	May and Associates, CPA's, P.C. 2003 Montgomery Road, Ste 101 Aurora, IL 60504		From-To	08/06/2002 to present			
	_	ckson Builders Inc.	rer	tal real estate		EIN:	20-3655517			
	, i		200	y and Associates, CPA's, P.C. 03 Montgomery Road, Ste 101 rora, IL 60504		From-To	10/17/2005 to pres	ent		
		ckenzie Graphics, Inc.	gra	phics		EIN:	61-1446154			
		l Young Ave. tavia, IL 60510	200	y and Associates, CPA's, P.C. 03 Montgomery Road, Ste 101 rora, IL 60504		From-To	03/27/2003 to pres	ent		

Case 18-26532 Doc 1 Filed 09/20/18 Entered 09/20/18 15:10:47 Desc Main Document Page 43 of 71 James E. Malley, III Debtor 1 **Roxanne Lea Malley** Debtor 2 Case number (if known) Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. **Date Issued** Name (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ James E. Malley, III /s/ Roxanne Lea Malley **Roxanne Lea Malley** James E. Malley, III Signature of Debtor 1 Signature of Debtor 2 Date September 20, 2018 Date **September 20, 2018** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	rmation to identify your	case:		
Debtor 1	James E. Malley,	III		
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Roxanne Lea Mal	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing
Official Fo				
<u>Stateme</u>	nt of Intentio	<u>n for Indiv</u>	viduals Filing Under Chapt	er 7 12/15
you have lea You must file th which on the If two married p sign a Be as complete write y Part 1: List Y	ever is earlier, unless the form eeople are filing togetheeond date the form. e and accurate as possibly our name and case nuited.	ur property, or and the lease has rithin 30 days after the court extends the rin a joint case, both le. If more space in the cif known).		ne creditors and lessors you list information. Both debtors must in the top of any additional pages,
information b	-		What do you intend to do with the property that	· · · · · · · · · · · · · · · · · · ·
			secures a debt?	as exempt on Schedule C?
Creditor's name:	Ally Financial		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description o property securing debt	miles	e 116,000	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's	Bank of America Hon	ne Loans	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description o	•		Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt	60510 Kane Coun	ty	Retain the property and [explain]: will not reaffirm	_
Creditor's (Carmax		☐ Surrender the property. ☐ Retain the property and redeem it.	□No

Official Form 108

property

Description of

Statement of Intention for Individuals Filing Under Chapter 7

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

miles

2012 Honda Odyssey 82,000

Yes

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Debtor 1 Debtor 2	James E. Malley, III Roxanne Lea Malley	Case number (if kno	own)
securir	ng debt:		
Credito	or's FNBC	☐ Surrender the property. ☐ Retain the property and redeem it.	□No
Descri	ption of 641 Young Ave. Batavia, IL	Retain the property and redeem it. Reaffirmation Agreement.	■ Yes
proper securir	ty 60510 Kane County ng debt:	Retain the property and [explain]: will not reaffirm	
in the info	ormation below. Do not list real estate leases.	es ted in Schedule G: Executory Contracts and Unex Unexpired leases are leases that are still in effect e if the trustee does not assume it. 11 U.S.C. § 365	the lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's	name: on of leased		□ No
Property:			☐ Yes
	on of leased		□ No
Property:			☐ Yes
	on of leased		□ No
Property:			☐ Yes
	on of leased		□ No
Property:			☐ Yes
	on of leased		□ No
Property:			☐ Yes
	on of leased		□ No
Property:			☐ Yes
	on of leased		□ No
Property:			☐ Yes
	Sign Below nalty of perjury, I declare that I have indicated that is subject to an unexpired lease.	my intention about any property of my estate that	secures a debt and any personal
Jan	James E. Malley, III nes E. Malley, III nature of Debtor 1	X /s/ Roxanne Lea Malley Roxanne Lea Malley Signature of Debtor 2	
Date	Sentember 20, 2018	Date Sentember 20 2018	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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E31 to 05 to 150	and the first self-consequence				
Fili in this int	ormation to identify your case:		heck one box only 22A-1Supp:	as directed in this form and in	Form
Debtor 1	James E. Malley, III		ли тоарр.		
Debtor 2 (Spouse, if filing)	Roxanne Lea Malley		■ 1. There is no	presumption of abuse	
	s Bankruptcy Court for the: Northern District of	of Illinois	applies will	tion to determine if a presumpt be made under <i>Chapter 7 Me</i>	
Case numbe	r		Calculation	(Official Form 122A-2).	
(if known)				Test does not apply now beca ilitary service but it could apply	
			☐ Check if this	is an amended filing	
Official	Form 122A - 1				
Chapte	r 7 Statement of Your Cur	rent Monthly Inc	come		12/15
attach a separ case number (qualifying mili	e and accurate as possible. If two married people a ate sheet to this form. Include the line number to v if known). If you believe that you are exempted fro tary service, complete and file Statement of Exemp Calculate Your Current Monthly Income a your marital and filing status? Check one or	hich the additional information m a presumption of abuse beca tion from Presumption of Abus	applies. On the top use you do not have	of any additional pages, write y e primarily consumer debts or be	our name and ecause of
	married. Fill out Column A, lines 2-11.	ny.			
	ried and your spouse is filing with you. Fill o	it both Columns A and B. lines	2-11		
	ried and your spouse is NOT filing with you.	,	5 2-11.		
	iving in the same household and are not lega	•	olumna A and B li	2 11	
	iving separately or are legally separated. Fill		•		oclara undar
р	enalty of perjury that you and your spouse are living apart for reasons that do not include evading	egally separated under nonba	nkruptcy law that a	applies or that you and your sp	
101(10A). F the 6 month	average monthly income that you received from all For example, if you are filing on September 15, the 6-mes, add the income for all 6 months and divide the total on the same rental property, put the income from that p	onth period would be March 1 throby 6. Fill in the result. Do not include:	ough August 31. If the ude any income amo	e amount of your monthly income vunt more than once. For example,	aried during if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commissions (before all	\$	\$	
	y and maintenance payments. Do not include B is filled in.	payments from a spouse if	\$	\$	
of you from an and roo	ounts from any source which are regularly payor your dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a sp. Do not include payments you listed on line 3.	Include regular contributions d, your dependents, parents,	\$	\$	
	ome from operating a business, profession,	or farm		<u> </u>	
		Debtor 1			
Gross r	eceipts (before all deductions)	\$			
	y and necessary operating expenses	-\$		•	
	nthly income from a business, profession, or far	m \$ Copy here -:	>\$		
6. Net inc	ome from rental and other real property	Debtor 1			
^	and the form all the description	\$			
	eceipts (before all deductions)	-\$			
	y and necessary operating expenses nthly income from rental or other real property	\$ Copy here -:	> \$	\$	
	t dividends and royalties	Ψ	\$	<u> </u>	

Official Form 122A-1

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	ames E. Malley, III Loxanne Lea Malley			Case number	(if known)	
				Column A Debtor 1	Colum Debto non-fi	
8. Unem	ployment compensation			\$	\$	
	enter the amount if you contend that the amount r	eceived was a benef	fit under			
	cial Security Act. Instead, list it here:					
For	you \$ your spouse \$					
For	your spouse \$					
	on or retirement income. Do not include any amount to the Social Security Act.	unt received that wa	s a	\$	\$	
Do not receive	e from all other sources not listed above. Speci include any benefits received under the Social Se ed as a victim of a war crime, a crime against humi- tic terrorism. If necessary, list other sources on a selow.	ecurity Act or paymen anity, or international	nts or			
				\$	\$	
				\$	\$	
	Total amounts from separate pages, if any.		+	\$	\$	
	late your total current monthly income. Add line column. Then add the total for Column A to the total		\$		+ \$	= \$
art 2:	Determine Whether the Means Test Applies to	You				income
2 Calcul	ate your current monthly income for the year. I	Follow these steps:				
	copy your total current monthly income from line 11	•		Сору	line 11 here=>	\$
M	fultiply by 12 (the number of months in a year)					x 12
12b. T	he result is your annual income for this part of the	form				12b. \$
13. Calcul	ate the median family income that applies to yo	ou. Follow these ster	os:			
Fill in t	he state in which you live.					
	he number of people in your household.					
Fill in t	he median family income for your state and size of	household.				13. \$
I o fino	I a list of applicable median income amounts, go o form. This list may also be available at the bankru	nline using the link sp	pecified	in the separa	te instructions	
4. How d	lo the lines compare?					
14a.	☐ Line 12b is less than or equal to line 13. On Go to Part 3.	the top of page 1, ch	eck box	1, There is r	o presumption of	abuse.
14b.	☐ Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	page 1, check box 2	, The pr	esumption of	abuse is determin	ed by Form 122A-2.
art 3:	Sign Below					
	y signing here, I declare under penalty of perjury the	hat the information o	n thic ct	atement and i	n any attachment	s is true and correct
					•	o io irao aria correct.
Х	/s/ James E. Malley, III			anne Lea M		
	James E. Malley, III Signature of Debtor 1			ne Lea Malle e of Debtor 2	ey	
Data	•	_	•		0	
Date	September 20, 2018 MM / DD / YYYY			iber 20, 201	0	-
If	you checked line 14a, do NOT fill out or file Form	•	, 55			
	you checked line 14b, fill out Form 122A-2 and file					
- 11	you oncomed into 1-b, in out I offit 122/1-2 and int	, it with this follow.				

James E. Malley, III

Fill i	n this info	orma	tion to identify your case:	
Debt	or 1	Ja	mes E. Malley, III	
Debt (Spo	or 2 use, if filin		exanne Lea Malley	
Unite	ed States I	Bank	ruptcy Court for the: Northern District of Illinois	
	e number own)	-		☐ Check if this is an amended filing
			n 122A - 1Supp of Exemption from Presumption of Al	ouse Under § 707(b)(2) 12/1
exem exclu equi	pted fron sions in t red by 11	n a p this s U.S.	nt together with Chapter 7 Statement of Your Current Monthly Incresumption of abuse. Be as complete and accurate as possible. If statement applies to only one of you, the other person should con C. § 707(b)(2)(C).	two married people are filing together, and any of the
Part			/ the Kind of Debts You Have	
	personal,	fami	s primarily consumer debts? Consumer debts are defined in 11 U.S ly, or household purpose." Make sure that your answer is consistent wing for Bankruptcy (Official Form 1).	
			Form 122A-1; on the top of page 1 of that form, check box 1, <i>There is</i>	no presumption of abuse, and sign Part 3. Then submit this
	_	٠.	ement with the signed Form 122A-1.	
	☐ Yes. (0 to د	Part 2.	
Part	2: De	term	ine Whether Military Service Provisions Apply to You	
2.	Are you a	a dis	abled veteran (as defined in 38 U.S.C. § 3741(1))?	
	□ No. (
		•	ou incur debts mostly while you were on active duty or while you were S.C. § 101(d)(1); 32 U.S.C. § 901(1).	performing a homeland defense activity?
			Go to line 3.	
	ΠY	es.	Go to Form 122A-1: on the top of page 1 of that form, check box 1, 7, submit this supplement with the signed Form 122A-1.	here is no presumption of abuse, and sign Part 3. Then
3.	Are you	or ha	ve you been a Reservist or member of the National Guard?	
	_ •		plete Form 122A-1. Do not submit this supplement.	
	☐ Yes.	Wer	e you called to active duty or did you perform a homeland defense acti	vity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
			Complete Form 122A-1. Do not submit this supplement.	
	ΠY	es.	Check any one of the following categories that applies:	
			I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3 <i>The Means Test does not apply now</i> , and sign Part 3. Ther
			I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on, which is fewer than 540 days before I file this bankruptcy case.	submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The <i>exclusion period</i> means the time you are on active duty or are performing a
			I am performing a homeland defense activity for at least 90 days.	homeland defense activity, and for 540 days afterward, 11
			I performed a homeland defense activity for at least 90 days, ending on, which is fewer than 540 days before I file this bankruptcy case.	If your exclusion period ends before your case is closed, you may have to file an amended form later.

Official Form 122A-1Supp

		irected in this form and in Forn	n
Debtor 1 James E. Malley, III	22A-1Supp:		
Debtor 2 (Spouse, if filing) Roxanne Lea Malley	☐ 1. There is no presi	umption of abuse	
United States Bankruptcy Court for the: Northern District of Illinois Case number	applies will be m	o determine if a presumption on an ade under <i>Chapter 7 Means</i> cial Form 122A-2).	
(if known)		does not apply now because of service but it could apply late	
	☐ Check if this is a	n amended filing	
Official Form 122A - 1			
Chapter 7 Statement of Your Current Monthly In	come		12/15
Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines	s 2-11.		form.
☐ Living in the same household and are not legally separated. Fill out both C☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do repenalty of perjury that you and your spouse are legally separated under nonbar	not fill out Column B. By ankruptcy law that applie	checking this box, you declard	
living apart for reasons that do not include evading the Means Test requirement. Fill in the average monthly income that you received from all sources, derived during the 6 for 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include spouses own the same rental property, put the income from that property in one column only. If you	ull months before you file ough August 31. If the amoude any income amount mo	e this bankruptcy case. 11 U.S.C. unt of your monthly income varied ore than once. For example, if both	during
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 8,749.00	\$0.00	
3. Alimony and maintenance payments. Do not include payments from a spouse if	0.00		

0.00

0.00

	from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	d, you	r depende	nts, parents,	6.00	. \$	0.00
5.	Net income from operating a business, profession,	or far					
			Deb	otor 1			
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	-\$	0.00				
	Net monthly income from a business, profession, or far	m \$ _	0.00	Copy here -> \$	0.00	\$_	0.00
6.	Net income from rental and other real property						
			Deb	otor 1			
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	-\$	0.00				
	Net monthly income from rental or other real property	\$	0.00	Copy here -> \$	0.00	\$	0.00
7.	Interest, dividends, and royalties			9	0.00	\$	0.00

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions

Column B is filled in.

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	tanne Lea Malley			Case number	er (<i>if known</i>)			
				Column A Debtor 1		Column Debtor 2		
Unemplo	yment compensation			\$	0.00	\$	0.00	
	nter the amount if you contend that the am I Security Act. Instead, list it here:	ount received was a ben	efit unde	er				-
For yo		\$	0.00					
	ur spouse		0.00					
benefit ur	or retirement income. Do not include any order the Social Security Act.			\$	0.00	\$	0.00	_
Do not in received	rom all other sources not listed above. clude any benefits received under the Soc as a victim of a war crime, a crime against terrorism. If necessary, list other sources w.	sial Security Act or payment thumanity, or internation	ents al or					
				\$	0.00	\$	0.00	_
_				\$	0.00	\$	0.00	_
•	Total amounts from separate pages, if any	'-		+ \$	0.00	\$	0.00	-
	e your total current monthly income. Ad Imn. Then add the total for Column A to th		\$	8,749.00	+ -	0.00	_	8,749.0
							Total	l current mont me
2: De	etermine Whether the Means Test Appli	es to You						
	e your current monthly income for the y	•						
12a. Cop	y your total current monthly income from li	ne 11		Cop	y line 11	here=>	\$	8,749.0
Mult	iply by 12 (the number of months in a year	r)						12
12b. The	result is your annual income for this part of	of the form				1	2b. \$	104,988.00
Calculate	e the median family income that applies	to you. Follow these st	eps:					
Fill in the	state in which you live.	IL						
Fill in the	number of people in your household.	5						
To find a	median family income for your state and s list of applicable median income amounts rm. This list may also be available at the b	, go online using the link	specifie	d in the separ	ate instru		3. \\$	104,885.00
How do	the lines compare?							
14a. C	Line 12b is less than or equal to line 13 Go to Part 3.	3. On the top of page 1, o	check bo	ox 1, <i>There i</i> s	no presur	nption of ab	ouse.	
14b.	Line 12b is more than line 13. On the t Go to Part 3 and fill out Form 122A-2.	op of page 1, check box	2, The p	oresumption o	of abuse is	determined	by Form	122A-2.
3: Si	gn Below							
By s	igning here, I declare under penalty of per	rjury that the information	on this s	statement and	I in any att	achments is	s true and	correct.
X /s	s/ James E. Malley, III	x	/s/ Ro	xanne Lea	Malley			
J	ames E. Malley, III ignature of Debtor 1	^	Roxar	nne Lea Mal	lley			
Date S	eptember 20, 2018	Date	Septe	mber 20, 20				
IV	M/DD/YYYY		IVIIVI / D	D / YYYY				
If wo	u checked line 14a, do NOT fill out or file I	Form 122∆-2						

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Fill	in this information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Del	btor 1 James E. Malley, III	
	btor 2 Roxanne Lea Malley	According to the calculations required by this Statement:
` '	,	■ 1. There is no presumption of abuse.
Uni	ited States Bankruptcy Court for the: Northern District of Illinois	
	se number	☐ 2. There is a presumption of abuse.
(if k	known)	
Of	ficial Form 122A - 2	☐ Check if this is an amended filing
	napter 7 Means Test Calculation	04/1
	fill out this form, you will need your completed copy of Chapter 7 Statemen	
spa add	as complete and accurate as possible. If two married people are filing together is needed, attach a separate sheet to this form, Include the line number litional pages, write your name and case number (if known). The start of	
1.	Copy your total current monthly income. Copy line 11 fr	om Official Form 122A-1 here=> \$ 8,749.00
2.	Did you fill out Column B in Part 1 of Form 122A-1?	
	□ No. Fill in \$0 for the total on line 3.	
	Yes. Is your spouse Filing with you?	
	□ No. Go to line 3.	
	Yes. Fill in \$0 for the total on line 3.	
3.	Adjust your current monthly income by subtracting any part of your spo household expenses of you or your dependents. Follow these steps:	use's income not used to pay for the
	On line 11, Column B of Form 122A–1, was any amount of the income you re expenses of you or your dependents?	ported for your spouse NOT regularly used for the household
	■ No. Fill in 0 for the total on line 3.	
	☐ Yes. Fill in the information below:	
	State each purpose for which the income was used	Fill in the amount you
	For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are subtracting from your spouse's income
		\$
		\$
		\$
		·
	Total.	\$
		Copy total here=> \$ 0.00
1		

4. Adjust your current monthly income. Subtract line 3 from line 1.

8,749.00

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ebtor 1 ebtor 2	James E. Malley, III Roxanne Lea Malley		Case number (if known)
art 2:	Calculate Your Deductions from Your Income		
to ansinstru Deduction your a	ternal Revenue Service (IRS) issues National and Lewer the questions in lines 6-15. To find the IRS state ctions for this form. This information may also be at the expense amounts set out in lines 6-15 regardless ctual expenses if they are higher than the standards. Deein line 3 and do not deduct any operating expenses the	ndards, go online available at the bar of your actual expe to not deduct any ar	using the link specified in the separate ckruptcy clerk's office. nse. In later parts of the form, you will use some of nounts that you subtracted fro your spouse's
•	expenses differ from month to month, enter the average ever this part of the from refers to <i>you</i> , it means both you		if Column B of Form 122A-1 is filled in.
5. T	he number of people used in determining your ded	luctions from inco	me
р	ill in the number of people who could be claimed as ex lus the number of any additional dependents whom you ne number of people in your household.		
Nation	nal Standards You must use the IRS Nationa	I Standards to answ	ver the questions in lines 6-7.
	food, clothing, and other items: Using the number of standards, fill in the dollar amount for food, clothing, and		in line 5 and the IRS National \$\$
th p	Out-of-pocket health care allowance: Using the number dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care. The number who are 65 or older-because older people have igher than this IRS amount, you may deduct the additional transfer of the second sec	nber of people is sp a higher IRS allowa	it into two categoriespeople who are under 65 and ance for health care costs. If your actual expenses are
People	e who are under 65 years of age		
7	a. Out-of-pocket health care allowance per person	\$ 52	
7	b. Number of people who are under 65	X 5	
7	c. Subtotal. Multiply line 7a by line 7b.	\$260.00	Copy here=> \$260.00
People	e who are 65 years of age or older		
7	d. Out-of-pocket health care allowance per person	\$ 114	
7	e. Number of people who are 65 or older	X0	
7	f. Subtotal. Multiply line 7d by line 7e.	\$	Copy here=> +\$
7	g. T otal. Add line 7c and line 7f		\$ Copy total here=> \$ 260.00

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Debtor 1 James E. Malley, III
Debtor 2 Roxanne Lea Malley

Case number (if known)

Loc	al Sta	andards	You mus	st use the IRS	Local Standa	rds to ans	wer the q	uestions in lin	es 8-15.					
				the IRS, the two parts:	U.S. Trustee	Program	has divid	led the IRS L	ocal Stand	ard for	housir	g for		
■ F	lousi	ing and ut	tilities - Ir	nsurance and	l operating ex	cpenses								
■ H	łousi	ing and ut	tilities - N	lortgage or r	ent expenses									
To a	answ	er the que	estions in	n lines 8-9, us	se the U.S. Tr	ustee Pro	gram cha	art.						
					pecified in the nkruptcy clerk'		instructio	ns for this forr	m.					
8.					nd operating unty for insura							5, fill \$		661.00
9.	Hou	sing and	utilities -	Mortgage or	rent expense	es:								
	9a.				entered in line ge or rent expe					\$	1,	874.00		
	9b.	Total ave	erage mon	nthly payment	for all mortgag	ges and ot	her debts	secured by y	our home.					
		contractu	ally due to		onthly paymered creditor in the contract of th									
		Name of	the credit	or			Average paymen	e monthly t						
			Americ	a Home Lo	ans		\$	2,180.00						
		FNBC					\$	295.00						
				Total averaç	ge monthly pay	/ment	\$	2,475.00	Copy here=>	-\$	2	2,475.00	Repeat this amount on line 33a.	
	9c.	Net morto	gage or re	ent expense.										
					nonthly payme is less than \$0				\$		0.00	Copy here=>	\$	0.00
10.					rogram's divi thly expense					g is ind	correct	and	\$	601.00
	Ex	plain why:	actual	l mortgage	payment									
11.	Loc	al transpo	ortation e	expenses: Ch	eck the numbe	er of vehicle	les for wh	ich you claim	an ownersh	nip or o	perating	expense.		
	□ o	. Go to line	e 14.											
	□ 1	. Go to line	e 12.											
	2 2	or more.	Go to line	e 12.										

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

458.00

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 Vehicle ownership or lease expense: Using the IRS Loc You may not claim the expense if you do not make any loa more than two vehicles. 						
Vehicle 1 Describe Vehicle 1: 2011 Buick Enclave 1	116,000 miles	5				
13a. Ownership or leasing costs using IRS Local Standard			\$	497.00		
13b. Average monthly payment for all debts secured by Vehicle Do not include costs for leased vehicles.	1.					
To calculate the average monthly payment here and on lin- are contractually due to each secured creditor in the 60 mo bankruptcy. Then divide by 60.			t			
Name of each creditor for Vehicle 1	Average n	nonthly				
Ally Financial	\$	253.00				
Total Average Monthly Payment	\$	253.00	Copy here =>	-\$253	Repeat this amount on line 33b.	
13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$	\$0, enter \$0.		\$	244.00	Copy net Vehicle 1 expense here => \$	244.00
Vehicle 2 Describe Vehicle 2: 2012 Honda Odyssey	82,000 mile	s				
13d. Ownership or leasing costs using IRS Local Standard			. \$	497.00		
13e. Average monthly payment for all debts secured by Vehicle leased vehicles.	2. Do not inclu	ıde costs foı	r			
Name of each creditor for Vehicle 2	Average n	nonthly				
Carmax	\$	405.45				
Total Average Monthly Payment	\$	405.45	Copy here => -\$ _	405.4	Repeat this amount on line 33c.	
13f. Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$	\$0, enter \$0		. \$	91.55	Copy net Vehicle 2 expense here => \$	91.55
14. Public transportation expense: If you claimed 0 vehicles <i>Transportation</i> expense allowance regardless of whether y				ards, fill in the	Public \$	0.00
15. Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for <i>Public Trans</i>	what you belie					0.00

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Oth		In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, soci your pay for these taxes. Ho	nount that you will actually owe for federal, state and local taxes, such as income taxes, al security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 mm the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	ales, or use taxes.	\$	1,426.00
17.	Involuntary deductions: The contributions, union dues, and	ne total monthly payroll deductions that your job requires, such as retirement and uniform costs.		
	Do not include amounts that	are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paym	onthly premiums that you pay for your own term life insurance. If two married people are ents that you make for your spouse's term life insurance. Do not include premiums for life hts, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	110.00
19.		The total monthly amount that you pay as required by the order of a court or as spousal or child support payments.		
	Do not include payments on	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your joint in the second	ly amount that you pay for education that is either required: b. or		
	_	ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly	y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
		any elementary or secondary school education.	\$	0.00
22.	that is required for the health	enses, excluding insurance costs: The monthly amount that you pay for health care and welfare of you or your dependents and that is not reimbursed by insurance or paid. Include only the amount that is more than the total entered in line 7.		
	Payments for health insuran	ce or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependents	lephone services: The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of d by your employer.		
		basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses all Add lines 6 through 23.	lowed under the IRS expense allowances.	\$	5,902.55

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Add	tional Expense Deductions These are additional	deduction	ns allowed by th	e Means Test.		
	Note: Do not include	any expe	nse allowances	listed in lines 6-24.		
25.	Health insurance, disability insurance, and health sinsurance, disability insurance, and health savings acceptour dependents.				r	
	Health insurance	\$	688.00			
	Disability insurance	\$	0.00			
	Health savings account	+ \$	0.00			
	Total	\$	688.00	Copy total here=>	\$	688.00
	Do you actually spend this total amount?					
	No. How much do you actually spend?Yes	\$				
	Continued contributions to the care of household continue to pay for the reasonable and necessary care your household or member of your immediate family winclude contributions to an account of a qualified ABLE	or family and suppho is una program	port of an elderlible to pay for su . 26 U.S.C.§ 52	y, chronically ill, or disabled member of uch expenses. These expenses may 9A(b).	\$	0.00
27.	Protection against family violence. The reasonably safety of you and your family under the Family Violence					
	By law, the court must keep the nature of these expens	ses confid	dential.		\$	0.00
28.	Additional home energy costs. Your home energy coline 8.	osts are in	ncluded in your	insurance and operating expenses on		
	If you believe that you have home energy costs that ar 8, then fill in the excess amount of home energy costs.		nan the home er	nergy costs included in expenses on line		
	You must give your case trustee documentation of you amount claimed is reasonable and necessary.	ır actual e	expenses, and y	ou must show that the additional	\$	0.00
29.	Education expenses for dependent children who at \$160.42* per child) that you pay for your dependent chipublic elementary or secondary school.					
	You must give your case trustee documentation of you claimed is reasonable and necessary and not already					
	* Subject to adjustment on 4/01/19, and every 3 years	after that	for cases begui	n on or after the date of adjustment.	\$	220.00
30.	Additional food and clothing expense. The monthly higher than the combined food and clothing allowances than 5% of the food and clothing allowances in the IRS	s in the IF	RS National Star	ctual food and clothing expenses are ndards. That amount cannot be more		
	To find a chart showing the maximum additional alloware instructions for this form. This chart may also be availa		•			
	You must show that the additional amount claimed is re	easonabl	e and necessar	у.	\$	0.00
31.	Continuing charitable contributions. The amount the instruments to a religious or charitable organization. 26			ntribute in the form of cash or financial	+\$	160.00
32.	Add all of the additional expense deductions. Add lines 25 through 31.				\$	1,068.00

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Debtor 1	James E. Malley, III	
Debtor 2	Roxanne Lea Malley	Case number (if known)

Dedu	ctions for Debt Payment						
	or debts that are secured by an inter ans, and other secured debt, fill in li	est in property that you own, including hon nes 33a through 33e.	ne mort	gages, vehicle			
	o calculate the total average monthly pareditor in the 60 months after you file for	ayment, add all amounts that are contractually bankruptcy. Then divide by 60.	due to 6	each secured			
	Mortgages on your home:					verage monthly ayment	
33a.	Copy line 9b here				=> \$	2,475.0	0
	Loans on your first two vehicles:						
33b.	Copy line 13b here				.=> \$	253.0	0
33c.	Copy line 13e here				=> \$	405.4	5
33d.	List other secured debts:						
Name	of each creditor for other secured debt	Identify property that secures the debt		Does paymer include taxes insurance?			
				□ No			
	-NONE-			☐ Yes	\$		
-					Φ		_
				☐ No			
				☐ Yes	\$		
				□ No	_		
					+ \$		_
33e.	Total average monthly payment. Add I	ines 33a through 33d	\$	3,133.45	Copy total here=>	. \$3,133.	45
		secured by your primary residence, a vehi					
	No. Go to line 35.						
		st pay to a creditor, in addition to the payments asion of your property (called the <i>cure amount</i> and information below.					
Name	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount	
-NO	NE-		9	\$	÷ 60 = \$		_
					\neg		_
		Tot	tal \$	0.00	Copy total here=>	. \$	0.00
		s a priority tax, child support, or alimony -ur bankruptcy case? 11 U.S.C. § 507.	that				
	re past due as of the filing date of yo		that				
ar	re past due as of the filing date of yo No. Go to line 36.	ur bankruptcy case? 11 U.S.C. § 507. these priority claims. Do not include current or					

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Debtor 1 Debtor 2		es E. Malley, III anne Lea Malley		Case	e number (if known)	
Fo	or more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for Bankruptcy Basins for this form. Bankruptcy Basics may also be available.	sics specified			
	No.	Go to line 37.				
	l Yes.	Fill in the following information.				
		Projected monthly plan payment if you were filing unde	r Chapter 13	3	\$	
		Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	istricts in Ala	ustees	x	_
		To find a list of district multipliers that includes your dis the link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				Copy total
		Average monthly administrative expense if you were fil	ing under Cl	napter 13	\$	here=> \$
		of the deductions for debt payment. es 33e through 36.				\$3,133.45
Total	Deduc	tions from Income				
38. A d	dd all d	of the allowed deductions.				
		ne 24, All of the expenses allowed under IRS e allowances	\$	5,902.55	_	
C	Copy lir	ne 32, All of the additional expense deductions	\$	1,068.00		
		ne 37, All of the deductions for debt payment	+\$	3,133.45		
		Total deductions	\$	10,104.00	Copy total here	=> \$10,104.00
Part 3:	Det	termine Whether There is a Presumption of Abuse				
39. C a	alculat	e monthly disposable income for 60 months				
3	39a. Co	ppy line 4, adjusted current monthly income	\$	8,749.00		
		ppy line 38, Total deductions	- \$	10,104.00	_	
3		onthly disposable income. 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a	\$	-1,355.00	Copy here=>\$	-1,355.00
F	or the	next 60 months (5 years)			 x	60
3	39d. To	otal. Multiply line 39c by 60	39d.	\$	81,300.00 Cop	
40. Fi	nd out	whether there is a presumption of abuse. Check the	box that app	lies:		
	The I	line 39d is less than \$7,700*. On the top of page 1 of th	nis form, che	ck box 1, The	ere is no presumptio	n of abuse. Go to Part 5.
		line 39d is more than \$12,850*. On the top of page 1 of 4 if you claim special circumstances. Go to Part 5.	f this form, cl	neck box 2, 7	here is a presumpti	on of abuse. You may fill out
] The I	line 39d is at least \$7,700*, but not more than \$12,850	0*. Go to line	41.		
*S	Subject	to adjustment on 4/01/19, and every 3 years after that for	or cases filed	on or after th	ne date of adjustmer	nt.

James E. Malley, III

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		es E. Malley, III anne Lea Malley	Case number (if known)	
1 1.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you A Summary of Your Assets and Liabilities and Certain Statistical Int Schedules (Official Form 106Sum), you may refer to line 3b on that	formation	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b		
		Multiply line 41a by 0.25		
25	% of y	ne whether the income you have left over after subtracting all all your unsecured, nonpriority debt. e box that applies:	owed deductions is enough to pay	
		39d is less than line 41b. On the top of page 1 of this form, check be Part 5.	oox 1, There is no presumption of abuse.	
		39d is equal to or more than line 41b. On the top of page 1 of this <i>umption of abuse.</i> You may fill out Part 4 if you claim special circumst		
rt 4:	Giv	ve Details About Special Circumstances		
	lo Go	to Part 5.		
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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

C	hapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B203	0 (Form 2030) (12/15)	Document	Page 64 of 7	1	
		United States Bank			
	Ta = (1/0) =	Northern District			
In re	JAMES F. MALLEY	KOXAUNE LEA	MALLEY	Case No.	4
		Debtor	(s)	Chapter .	
	DISCLOSURE O	F COMPENSATION O	F ATTORNEY	FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed compensation paid to me within one yea be rendered on behalf of the debtor(s) in	r before the filing of the petition in	a bankruptcy, or agree	d to be paid to	me, for services rendered or to
	For legal services. I have agreed to	accept	\$	2500	
	Prior to the filing of this statement	I have received	\$	2500	
	Balance Due		\$	10,00	·
2.	The source of the compensation paid to				
	Debtor Debtor Other (spec	ify):	i		
3.	The source of compensation to be paid	o me is:			
	Debtor Other (spec	ify):	:		
4.	I have not agreed to share the above	e-disclosed compensation with any	other person unless th	ney are memb	ers and associates of my law firm.
	I have agreed to share the above-di copy of the agreement, together with	sclosed compensation with a person halist of the names of the people	n or persons who are a sharing in the comper	not members of esation is attac	or associates of my law firm. A
5,	In return for the above-disclosed fee. I	have agreed to render legal service	e for all aspects of the	bankruptcy ca	ase, including:
	reaffirmation agreements	n, schedules, statement of affairs a	nd plan which may be ion hearing, and any a set value; exemption preparation and fi	required; djourned hear n planning;	rings thereof;
6.	By agreement with the debtor(s), the al	pove-disclosed fee does not includ	e the following service	: :	ı
<u> </u>		CERTIFICA	TION	 	
Ì	I certify that the foregoing is a complete	e statement of any agreement or a	rrangement for payme	nt to me for re	epresentation of the debtor(s) in
this	s bankruptcy proceeding.	,	Wille Total	llow	
	Dare !		am Teitelbaum 627	4270	`
			ture of Attorney : am Teitelbaum :		
		c/o [Donald Leibsker		
			. LaSalle Street, Su ago, IL 60603	ite 1230	
·		630-	202-8405 Fax: 312	-724-8626	
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		10 9	ald Leibsker, Esq. 5. LaSalle Street, S∟ cago, IL 60603	uite 1230	
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William Teitelbaum Attorney and Counselor At Law

Contract For Bankruptcy Services

This agreement is executed this	147H day of SEPTEMBEK, 2018, by and
between William Teitelhaum and Dona	ld Leibsker (hereinafter the "Attorneys" and "A Debt.
Relief Agency") and JAMES E.	MAMEY III and
KOXANUE LEA HALLEY	HAWEY and (hereinafter "Client(s)," whether one or more). The
parties agree as follows:	

Type of Bankruptcy

Client retains attorney to file a Chapter 7 bankruptcy. If the Client determines at a later date that the Client desires to file a Chapter 13 bankruptcy, the parties shall execute a new contract setting forth the terms of the legal representation.

Services Provided by Attorney

- Analysis of your financial condition;
- Advise you as to the advisability of seeking relief in bankruptcy under either Chapter 7 or Chapter 13 of the Bankruptcy Code;
- Assist you in assembling all documents necessary for or in connection with the filing of a
 petition under the Bankruptcy Code;
- Advise you as to availability of exemptions under applicable law;
- Assist you in meeting all conditions precedent as to filing for relief under the Bankruptcy Code and in meeting all conditions precedent to obtaining a discharge, if you are eligible to receive a discharge;
- Prepare you for examinations at the meeting of creditors pursuant to Section 341 of the Bankruptcy code and accompany you to the meeting;
- Assist you with affirmation agreements, if applicable;
- Assist you in the enforcement of the automatic stay if required;
- Arrange for electronic filing of your bankruptcy petition and supporting papers;
- Communicate with your bankruptcy Trustee;
- · Communicate with your creditors, if necessary; and
- Assist in arranging for a pre-discharge financial course.

Fees and Terms of Payment

- The filing fee of Chapter 7 bankruptcy is \$335.00 and must be remitted before the bankruptcy petition can be filed in Federal Court. The filing fee is a court cost over and above the Attorney fee.
- The Client agrees to pay an Attorney fee of 60,500 for the Chapter 7 bankruptcy.
- The Client and Attorney will negotiate a new fee agreement for services rendered beyond those services listed in Services Provided by Attorney.

You are aware that attorneys Donald Leibsker, and William Teitelbaum will be working on your case and will be sharing fees that you have paid. The Client understands that if the Client does not pay the fees as set out above, the Attorney has no obligation to provide the service, and has the right to file a motion to withdraw as the Attorney for the Client in this case.

Services Not Provided Under the Attorney Fee

- Additional creditors' examination;
- · Court appearances beyond the first creditor's examination;
- Adversary proceedings;
- Amendments to the original petition;
- Judicial lien avoidances; and
- Any other services, such as defense of a complaint to determine discharge ability of a
 debt or of a United States Trustee motion to convert this case or dismiss it as an abusive
 filing.

Client's Obligations

- To pay the fees as set out above;
- To provide accurately and honestly all the information necessary to prepare and file the Chapter 7 bankruptcy;
- To keep the Attorney advised at all times of the Client's address and telephone numbers;
- To attend the 341 Creditors' Meeting and any other hearings set in the case;
- To provide any information requested of the Client by the Trustee, or any other party in the case, unless the Court rules that the Debtor is not required to provide the information; and
- To respond immediately to any requests of the Client by the Attorney.

As a separate document, but included as part of this representation agreement, we are giving you notice of "Important Information About the Bankruptcy Assistance Services from an Attorney" as required by Section 527 of the Bankruptcy Reform Act.

This agreement represents the complete agreement between the parties and may not be

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modified or replaced except by a separate agreement executed by the parties.

Dated:

Dated:

9-14-15 Dated:

Attorney
A Debt Relief Agency

Teitelle

A Debt Relief Agency

Client

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United States Bankruptcy Court Northern District of Illinois

In re	James E. Malley, III Roxanne Lea Malley		Case No.		
		Debtor(s)	Chapter	7	
	VERII	FICATION OF CREDITOR M		25	
		Number of Creditors:			
	The above-named Debtor(s) her (our) knowledge.	reby verifies that the list of credit	tors is true and	correct to the best of my	
Date:	September 20, 2018	/s/ James E. Malley, III			
		James E. Malley, III Signature of Debtor			
Date:	September 20, 2018	/s/ Roxanne Lea Malley			
		Roxanne Lea Malley			
		Signature of Debtor			

Ally Financial PO Box 380901 Minneapolis, MN 55430

American Express PO Box 981535 El Paso, TX 79998-1535

American Express PO Box 0001 Los Angeles, CA 90096

Bank of America PO Box 31785 Tampa, FL 33634

Bank of America Home Loans PO Box 5170 Simi Valley, CA 93062

Bank of America Home Loans PO Box 5170 Santa Cruz, CA 95062

Cadence Health 25 N. Winfield Road Winfield, IL 60190

Cadence Health PO Box 4090 Carol Stream, IL 60197

Capital One PO Box 6492 Carol Stream, IL 60197

Capital One Bank (USA), N.A. c/o Blitt & Gaines, P.C. 661 Glenn Ave.
Wheeling, IL 60090

Carmax PO Box 440609 Kennesaw, GA 30160 Chase PO Box 15298 Wilmington, DE 19850-5298

Discover Bank c/o Blitt & Gaines, P.C. 661 Glenn Avenue Wheeling, IL 60090

Dish Network 9601 S. Meridian Boulevard Englewood, CO 80112

FNBC 620 W. Burlington Ave. La Grange, IL 60525

Kohl's PO Box 3043 Milwaukee, WI 53201

Lemont Village Hall 418 Main Street Lemont, IL 60439

Macy's PO Box 183083 Columbus, OH 43218

MCS Collections, Inc. PO Box 7699 Chicago, IL 60680

Nationwide Credit & Collection, Inc 815 Commerce Drive, Suite 270 Oak Brook, IL 60523

QVC/Synchrony Bank PO Box 965020 Orlando, FL 32896

U.S. Bank PO Box 4412 Portland, OR 97208 U.S. Bank PO Box 1800 Saint Paul, MN 55101

Wells Fargo PO Box 54349 Los Angeles, CA 90054

Wells Fargo PO Box 77033 Minneapolis, MN 55408